

2025 Summer Fun Registration

The Lakeway Church Christian Preschool
2203 Lakeway Blvd, Lakeway, Texas 78734

Please fill out a separate form for each child.

LCCP Use ONLY: Age Group: _____	
Session 1	2 3 4 5 6 7 8
Amount Paid _____	Paid By: _____
Amt. Due 5/15 _____	Amt. Due 6/13 _____

Today's Date _____ Child's Name _____
D.O.B. _____ Parents' Names (both) _____

4 digit pin for checking your child in/out: _____ Check one: Boy: _____ Girl: _____

Home Address _____

City _____ State: _____ Zip Code _____

Primary Phone _____ Alternate Phone (Mom) _____

Alternate phone (Dad) _____ Email _____








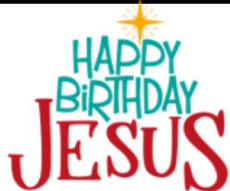
Allergies/Special Care Needs _____

IS YOUR CHILD ON OUR WAIT LIST? [Y] [N]

Note: Your child's participation in Summer Fun may increase their standing on our Wait List

Hours: 9:00am - 1:00pm (Tues-Thurs)	Ages: 2 years (as of September 1st) up to Pre-Kinder (summer prior to Kindergarten)
Rates: \$200 per session*	
*Non-refundable \$50 deposit per session due with registration. The remainder of tuition for Summer Fun camps is due in full by Thursday, May 15 (For Summer Fun Sessions 1, 2, 3, and 4) and Friday, June 13 (For Summer Fun Sessions 5, 6, 7 and 8). If the balance is not paid on time, the spot will be filled.	
***ONLINE PAYMENT: LCCP can draft my account for deposit and tuition payment. Initial _____	
***I understand that notification by the Tuesday prior to camp is required to receive a \$150 credit if withdrawing from upcoming week of camp. Initial _____	

Please check your choice(s): 1 2 3 4 5 6 7 8

<p>Session 1 (May 27-29)</p>  <p>Books-A-Million</p>	<p>Session 2 (June 3-5)</p>  <p>Infinity and Beyond</p>	<p>Session 3 (June 10-12)</p>  <p>Dive In</p>	<p>Session 4 (June 24-26)</p>  <p>Around the World</p>
<p>Session 5 (July 1-3)</p>  <p>America the Beautiful</p>	<p>Session 6 (July 8-10)</p>  <p>Dino Dig</p>	<p>Session 7 (July 15-17)</p>  <p>King of the Jungle</p>	<p>Session 8 (July 22-24)</p>  <p>Christmas in July</p>

* Please complete back page as well

Give the name, address and phone number of person to call in case of an emergency if parents / guardian cannot be reached:

I hereby authorize the childcare operation to allow my child to leave the childcare operation **ONLY** with the following persons. Children will only be released to a parent or a person designated by the parent/guardian after verification of ID.

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:

In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:

Name of Physician:	Address:	Ph.#:
Name of Emergency Medical Care Facility: Baylor Scott & White Center Lakeway	Address: 100 Medical Pkwy, Lakeway, TX 78738	Ph.#: 512-571-5000

I give consent for the facility to secure any and all necessary emergency medical care for my child.

Signature - Parent or Legal Guardian

My child has been examined within the past year by a health care professional and is able to participate in the day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and will submit it to The Lakeway Church Christian Preschool

IMMUNIZATION RECORD:

I have provided or will provide the childcare operation with a copy of my child's most current immunization record by the first day of Summer Fun camp attendance.

LCCP Activity Permission Form

***I give my child permission to ride the "Train" from Kiddy Express every Wednesday during Summer Camp. **Initial** _____

Signature - Parent or Legal Guardian

Date